

By



S B. No. 812

A BILL TO BE ENTITLED

AN ACT

relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subsection (E), Section 1, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-1, Vernon's Texas Insurance Code), is amended to read as follows:

(E) Standards for Policy Provisions. (1) The Board shall issue reasonable rules and regulations to establish specific standards including standards for readability of policies and for full and fair disclosure, that set forth the manner, content, and required disclosure for the sale of individual policies of accident and sickness insurance which shall be in addition to and in accordance with applicable laws of this state which may cover but shall not be limited to:

- (a) terms of renewability;
- (b) initial and subsequent conditions of eligibility;
- (c) nonduplication of coverage provisions;
- (d) coverage of dependents;
- (e) pre-existing conditions;
- (f) termination of insurance;
- (g) probationary periods;
- (h) limitations;
- (i) exceptions;

1 (j) reductions;
2 (k) elimination periods;
3 (l) requirements for replacement;
4 (m) recurrent conditions; and
5 (n) the definition of terms including but not limited to the
6 following: hospital, accident, sickness, injury, physician,
7 accidental means, total disability, partial disability, nervous
8 disorder, guaranteed renewable and noncancellable; provided that
9 any definition of hospital so developed shall not be applicable to
10 companies organized under Chapter 20 of this code, as amended. The
11 terms "sickness" and "injury" include a loss or impairment of
12 speech, spoken language skills, language comprehension, or hearing.

13 SECTION 2. Section 2, Chapter 397, Acts of the 54th
14 Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas
15 Insurance Code), is amended by amending Subsection (B) and by
16 adding Subsection (F) to read as follows:

17 (B) No policy of accident and sickness insurance shall make
18 benefits contingent upon treatment or examination by a particular
19 practitioner or by particular practitioners of the healing arts
20 hereinafter designated unless such policy contains a provision
21 designating the practitioner or practitioners who will be
22 recognized by the insurer and those who will not be recognized by
23 the insurer. Such provision may be located in the "Exceptions" or
24 "Exceptions and Reductions" provisions or elsewhere in the policy,
25 or by endorsement attached to the policy, at the insurer's option.
26 In designating the practitioners who will and will not be
27 recognized, such provision shall use the following terms: Doctor

1 of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor
2 Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist,
3 and Speech-language Pathologist. For purposes of this Act, such
4 designations shall have the following meanings:

5 Doctor of Medicine: One licensed by the Texas State Board of
6 Medical Examiners on the basis of the degree "Doctor of Medicine";

7 Doctor of Osteopathy: One licensed by the Texas State Board
8 of Medical Examiners on the basis of the degree of "Doctor of
9 Osteopathy";

10 Doctor of Dentistry: One licensed by the State Board of
11 Dental Examiners;

12 Doctor of Chiropractic: One licensed by the Texas Board of
13 Chiropractic Examiners;

14 Doctor of Optometry: One licensed by the Texas State Board
15 of Examiners in Optometry; [and]

16 Doctor of Podiatry: One licensed by the State Board of
17 Chiropody Examiners;

18 Audiologist: One with a master's or doctorate degree in
19 audiology from an accredited college or university and who is
20 certified by the American Speech and Hearing Association; and

21 Speech-language Pathologist: One with a master's or
22 doctorate degree in speech pathology or speech-language pathology
23 from an accredited college or university and who is certified by
24 the American Speech and Hearing Association.

25 (F) An individual policy or group policy of accident and
26 sickness insurance, including a policy issued by a corporation
27 subject to Chapter 20, Insurance Code, that is delivered or issued

1 for delivery to any person in this state, may not exclude coverage
2 for loss or impairment of speech, language, or hearing.

3 SECTION 3. Article 21.52, Insurance Code, is amended to read
4 as follows:

5 Art. 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH AND
6 ACCIDENT POLICIES

7 Sec. 1. DEFINITIONS. As used in this article:

8 (a) "health insurance policy" means any individual, group,
9 blanket, or franchise insurance policy, insurance agreement, or
10 group hospital service contract, providing benefits for medical or
11 surgical expenses incurred as a result of an accident or sickness;

12 (b) "doctor of podiatric medicine" includes D.P.M.,
13 podiatrist, doctor of surgical chiropody, D.S.C., and chiropodist;

14 (c) "doctor of optometry" includes optometrist, doctor of
15 optometry, and O.D.; [and]

16 (d) "doctor of chiropractic" means a person who is licensed
17 by the Texas Board of Chiropractic Examiners to practice
18 chiropractic; [-]

19 (e) [~~d~~] "licensed dentist" means a person who is licensed
20 to practice dentistry by the State Board of Dental Examiners;

21 (f) "audiologist" means a person who has received a master's
22 or doctorate degree in audiology from an accredited college or
23 university and is certified by the American Speech and Hearing
24 Association; and

25 (g) "speech-language pathologist" means a person who is
26 certified by the American Speech and Hearing Association to restore
27 speech loss or correct a speech impairment.

1 Sec. 2. APPLICATION OF THIS ARTICLE. This article applies
2 to and embraces all insurance companies, associations, and
3 organizations, whether incorporated or not, which provide health
4 benefits, accident benefits, or health and accident benefits for
5 medical or surgical expenses incurred as a result of an accident or
6 sickness. Without limiting the foregoing, this article
7 specifically applies to the insurance companies, associations, and
8 organizations which come within the purview of the following
9 designated chapters of the Insurance Code: Chapter 3, pertaining
10 to life, health and accident insurance companies; Chapter 8,
11 pertaining to general casualty companies; Chapter 10, pertaining to
12 fraternal benefit societies; Chapter 11, pertaining to mutual life
13 insurance companies; Chapter 12, pertaining to local mutual aid
14 associations; Chapters 13 and 14, pertaining to statewide mutual
15 assessment companies, mutual assessment companies, and mutual
16 assessment life, health and accident associations; Chapter 15,
17 pertaining to mutual insurance companies writing other than life
18 insurance; Chapter 18, pertaining to underwriters making insurance
19 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
20 exchanges; and Chapter 22, pertaining to stipulated premium
21 insurance companies. This article also applies to health
22 maintenance organizations established pursuant to Chapter 214, Acts
23 of the 64th Legislature, Regular Session, 1975 (Articles
24 20A.01-20A.33., Insurance Code), as now or hereafter amended.

25 Sec. 3. SELECTION OF PRACTITIONERS. Any person who is
26 issued, who is a party to, or who is a beneficiary under any health
27 insurance policy delivered, renewed, or issued for delivery in this

1 state by any insurance company, association, or organization to
2 which this article applies may select a licensed doctor of
3 podiatric medicine, a licensed dentist, or a doctor of chiropractic
4 to perform the medical or surgical services or procedures scheduled
5 in the policy which fall within the scope of the license of that
6 practitioner, [~~doctor~~-or] a licensed doctor of optometry to perform
7 the services or procedures scheduled in the policy which fall
8 within the scope of the license of that doctor of optometry, an
9 audiologist to measure hearing for the purpose of determining the
10 presence or extent of a hearing loss and to provide aural
11 rehabilitation services to a person with a hearing loss if those
12 services or procedures are scheduled in the policy, or a
13 speech-language pathologist to evaluate speech and language and to
14 provide habilitative and rehabilitative services to restore speech
15 or language loss or to correct a speech or language impairment if
16 those services or procedures are scheduled in the policy. The
17 [~~and~~] payment or reimbursement by the insurance company,
18 association, or organization for those services or procedures in
19 accordance with the payment schedule or the payment provisions in
20 the policy shall not be denied because the same were performed by a
21 licensed doctor of podiatric medicine, a licensed doctor of
22 optometry, [~~or~~] a licensed doctor of chiropractic, a licensed
23 dentist, an audiologist, or a speech-language pathologist. There
24 shall not be any classification, differentiation, or other
25 discrimination in the payment schedule or the payment provisions in
26 a health insurance policy, nor in the amount or manner of payment
27 or reimbursement thereunder, between scheduled services or

1 procedures when performed by a doctor of podiatric medicine, a
2 doctor of optometry, [er] a doctor of chiropractic, a licensed
3 dentist, an audiologist, or a speech-language pathologist which
4 fall within the scope of his license or certification and the same
5 services or procedures when performed by any other practitioner of
6 the healing arts whose services or procedures are covered by the
7 policy. Any provision in a health insurance policy contrary to or
8 in conflict with the provisions of this article shall, to the
9 extent of the conflict, be void, but such invalidity shall not
10 affect the validity of the other provisions of this policy. Any
11 presently approved policy form containing any provision in conflict
12 with the requirements of this Act shall be brought into compliance
13 with this Act by the use of riders and endorsements which have been
14 approved by the State Board of Insurance or by the filing of new or
15 revised policy forms for approval by the State Board of Insurance.

16 [See: 3- --SELECTION--OF--PRACTITIONERS--Any--person--who-is
17 issued,--who-is-a-party-to,--or-who-is-a-beneficiary-under-any-health
18 insurance-policy-delivered,--renewed,--or-issued-for-delivery-in-this
19 state-by-any-insurance-company,--association,--or--organization--to
20 which--this--article--applies--may--select--a--licensed--doctor--of
21 podiatric-medicine-or-a-licensed-dentist-to-perform-the-medical--or
22 surgical--services-or-procedures-scheduled-in-the-policy-which-fall
23 within-the-scope-of-the-license-of-that-doctor-or-a-licensed-doctor
24 of-optometry--or--licensed--dentist--to--perform--the--services--or
25 procedures--scheduled--in-the-policy-which-fall-within-the-scope-of
26 the-license-of-that-doctor-of-optometry-or--licensed--dentist,--and
27 payment--or-reimbursement-by-the-insurance-company,--association,--or

1 organization-for-these-services-or-procedures--in--accordance--with
2 the--payment-schedule-or-the-payment-provisions-in-the-policy-shall
3 not-be-denied-because-the-same-were-performed-by-a-licensed--doctor
4 of--pediatric--medicine;--a--licensed--doctor--of--optometry;--or-a
5 licensed--dentist. ---There--shall--not---be---any---classification,
6 differentiation, or other discrimination in the payment schedule or
7 the--payment--provisions--in--a-health-insurance-policy, nor in the
8 amount-or-manner-of-payment-or--reimbursement--thereunder;--between
9 scheduled--services--or--procedures--when--performed-by-a-doctor-of
10 pediatric-medicine, a-doctor-of-optometry, or--a--licensed--dentist
11 which-fall-within-the-scope-of-his-license-and-the-same-services-or
12 procedures--when-performed-by-any-other-practitioner-of-the-healing
13 arts-whose-services-or-procedures-are-covered-by-the--policy. ---Any
14 provision--in--a-health-insurance-policy-contrary-to-or-in-conflict
15 with-the-provisions-of-this-article-shall, to--the--extent--of--the
16 conflict;--be--void;--but--such--invalidity--shall--not--affect-the
17 validity-of-the-other-provisions-of--this--policy. ---Any--presently
18 approved--policy-form-containing-any-provision-in-conflict-with-the
19 requirements-of-this-Act-may-be-brought-into-compliance--with--this
20 Act--by-the-use-of-riders-and-endorsements-which-have-been-approved
21 by-the-State-Board-of-Insurance-or-by-the-filing-of-new-or--revised
22 policy-forms-for-approval-by-the-State-Board-of-Insurance.]

23 Sec. 4. CERTAIN EXEMPTIONS NOT APPLICABLE. The exemptions
24 and exceptions in Articles 13.09 and 21.41 of the Insurance Code do
25 not apply to this article.

26 SECTION 4. This Act takes effect September 1, 1983.

27 SECTION 5. The importance of this legislation and the

1 crowded condition of the calendars in both houses create an
2 emergency and an imperative public necessity that the
3 constitutional rule requiring bills to be read on three several
4 days in each house be suspended, and this rule is hereby suspended.

By: Brooks

S.B. No. 812

(In the Senate - Filed March 8, 1983; March 9, 1983, read first time and referred to Committee on Health and Human Resources; April 12, 1983, reported adversely, with favorable Committee Substitute; April 12, 1983, sent to printer.)

COMMITTEE SUBSTITUTE FOR S.B. No. 812

By: Brooks

A BILL TO BE ENTITLED
AN ACT

relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subsection (E), Section 1, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-1, Vernon's Texas Insurance Code), is amended to read as follows:

"(E) Standards for Policy Provisions. (1) The Board shall issue reasonable rules and regulations to establish specific standards including standards for readability of policies and for full and fair disclosure, that set forth the manner, content, and required disclosure for the sale of individual policies of accident and sickness insurance which shall be in addition to and in accordance with applicable laws of this state which may cover but shall not be limited to:

"(a) terms of renewability;
"(b) initial and subsequent conditions of eligibility;
"(c) nonduplication of coverage provisions;
"(d) coverage of dependents;
"(e) pre-existing conditions;
"(f) termination of insurance;
"(g) probationary periods;
"(h) limitations;
"(i) exceptions;
"(j) reductions;
"(k) elimination periods;
"(l) requirements for replacement;
"(m) recurrent conditions; and
"(n) the definition of terms including but not limited to the following: hospital, accident, sickness, injury, physician, accidental means, total disability, partial disability, nervous disorder, guaranteed renewable and noncancellable; provided that any definition of hospital so developed shall not be applicable to companies organized under Chapter 20 of this code as amended. The board shall define the terms 'sickness' and 'injury' to include a loss or impairment of speech, spoken language, language skills, language comprehension, or hearing."

SECTION 2. Section 2, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas Insurance Code), is amended by amending Subsection (B) and by adding Subsection (F) to read as follows:

"(B) No policy of accident and sickness insurance shall make benefits contingent upon treatment or examination by a particular practitioner or by particular practitioners of the healing arts hereinafter designated unless such policy contains a provision designating the practitioner or practitioners who will be recognized by the insurer and those who will not be recognized by the insurer. Such provision may be located in the 'Exceptions' or 'Exceptions and Reductions' provisions or elsewhere in the policy, or by endorsement attached to the policy, at the insurer's option. In designating the practitioners who will and will not be recognized, such provision shall use the following terms: Doctor of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist, and Speech-language Pathologist. For purposes of this Act, such designations shall have the following meanings:

"Doctor of Medicine: One licensed by the Texas State Board of Medical Examiners on the basis of the degree 'Doctor of Medicine';

"Doctor of Osteopathy: One licensed by the Texas State Board of Medical Examiners on the basis of the degree of 'Doctor of

Osteopathy';

"Doctor of Dentistry: One licensed by the State Board of Dental Examiners;

"Doctor of Chiropractic: One licensed by the Texas Board of Chiropractic Examiners;

"Doctor of Optometry: One licensed by the Texas State Board of Examiners in Optometry; [and]

"Doctor of Podiatry: One licensed by the State Board of Chiropody Examiners;

"Audiologist: One with a master's or doctorate degree in audiology from an accredited college or university and who is certified by the American Speech and Hearing Association; and

"Speech-language Pathologist: One with a master's or doctorate degree in speech pathology or speech-language pathology from an accredited college or university and who is certified by the American Speech and Hearing Association.

"(F) An individual policy or group policy of accident and sickness insurance, including a policy issued by a corporation subject to Chapter 20, Insurance Code, that is delivered or issued for delivery to any person in this state may exclude loss or impairment of speech, language, or hearing from the sickness or injury covered thereby where any insured named in the policy rejects the coverage in writing on a form promulgated by the board disclosing the reduction in premium cost resulting from such rejection. Such coverage need not be provided in or supplemental to a renewal policy if the named insured has rejected the coverage in connection with a policy previously issued to him by the same insurer or by an affiliated insurer unless such insured has requested such coverage in writing."

SECTION 3. Article 21.52, Insurance Code, is amended to read as follows:

"Article 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH AND ACCIDENT POLICIES.

"Section 1. DEFINITIONS. As used in this article:

"(a) 'health insurance policy' means any individual, group, blanket, or franchise insurance policy, insurance agreement, or group hospital service contract, providing benefits for medical or surgical expenses incurred as a result of an accident or sickness;

"(b) 'doctor of podiatric medicine' includes D.P.M., podiatrist, doctor of surgical chiropody, D.S.C., and chiropodist;

"(c) 'doctor of optometry' includes optometrist, doctor of optometry, and O.D.; [and]

"(d) 'doctor of chiropractic' means a person who is licensed by the Texas Board of Chiropractic Examiners to practice chiropractic; [-]

"(e) [~~d~~] 'licensed dentist' means a person who is licensed to practice dentistry by the State Board of Dental Examiners;

"(f) 'audiologist' means a person who has received a master's or doctorate degree in audiology from an accredited college or university and is certified by the American Speech and Hearing Association; and

"(g) 'speech-language pathologist' means a person who is certified by the American Speech and Hearing Association to restore speech loss or correct a speech impairment.

"Section 2. APPLICATION OF THIS ARTICLE. This article applies to and embraces all insurance companies, associations, and organizations, whether incorporated or not, which provide health benefits, accident benefits, or health and accident benefits for medical or surgical expenses incurred as a result of an accident or sickness. Without limiting the foregoing, this article specifically applies to the insurance companies, associations, and organizations which come within the purview of the following designated chapters of the Insurance Code: Chapter 3, pertaining to life, health and accident insurance companies; Chapter 8, pertaining to general casualty companies; Chapter 10, pertaining to fraternal benefit societies; Chapter 11, pertaining to mutual life insurance companies; Chapter 12, pertaining to local mutual aid associations; Chapters 13 and 14, pertaining to statewide mutual assessment companies, mutual assessment companies, and mutual assessment life, health and accident associations; Chapter 15,

1 pertaining to mutual insurance companies writing other than life
 2 insurance; Chapter 18, pertaining to underwriters making insurance
 3 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
 4 exchanges; and Chapter 22, pertaining to stipulated premium
 5 insurance companies. This article also applies to health
 6 maintenance organizations established pursuant to Chapter 214, Acts
 7 of the 64th Legislature, Regular Session, 1975 (Articles
 8 20A.01-20A.33., Insurance Code), as now or hereafter amended.

9 "Section 3. SELECTION OF PRACTITIONERS. Any person who is
 10 issued, who is a party to, or who is a beneficiary under any health
 11 insurance policy delivered, renewed, or issued for delivery in this
 12 state by any insurance company, association, or organization to
 13 which this article applies may select a licensed doctor of
 14 podiatric medicine, a licensed dentist, or a doctor of chiropractic
 15 to perform the medical or surgical services or procedures scheduled
 16 in the policy which fall within the scope of the license of that
 17 practitioner, ~~[doctor-or]~~ a licensed doctor of optometry to perform
 18 the services or procedures scheduled in the policy which fall
 19 within the scope of the license of that doctor of optometry, an
 20 audiologist to measure hearing for the purpose of determining the
 21 presence or extent of a hearing loss and to provide aural
 22 rehabilitation services to a person with a hearing loss if those
 23 services or procedures are scheduled in the policy, or a
 24 speech-language pathologist to evaluate speech and language and to
 25 provide habilitative and rehabilitative services to restore speech
 26 or language loss or to correct a speech or language impairment if
 27 those services or procedures are scheduled in the policy. The
 28 ~~[and]~~ payment or reimbursement by the insurance company,
 29 association, or organization for those services or procedures in
 30 accordance with the payment schedule or the payment provisions in
 31 the policy shall not be denied because the same were performed by a
 32 licensed doctor of podiatric medicine, a licensed doctor of
 33 optometry, ~~[or]~~ a licensed doctor of chiropractic, a licensed
 34 dentist, an audiologist, or a speech-language pathologist. There
 35 shall not be any classification, differentiation, or other
 36 discrimination in the payment schedule or the payment provisions in
 37 a health insurance policy, nor in the amount or manner of payment
 38 or reimbursement thereunder, between scheduled services or
 39 procedures when performed by a doctor of podiatric medicine, a
 40 doctor of optometry, ~~[or]~~ a doctor of chiropractic, a licensed
 41 dentist, an audiologist, or a speech-language pathologist which
 42 fall within the scope of his license or certification and the same
 43 services or procedures when performed by any other practitioner of
 44 the healing arts whose services or procedures are covered by the
 45 policy. Any provision in a health insurance policy contrary to or
 46 in conflict with the provisions of this article shall, to the
 47 extent of the conflict, be void, but such invalidity shall not
 48 affect the validity of the other provisions of this policy. Any
 49 presently approved policy form containing any provision in conflict
 50 with the requirements of this Act shall be brought into compliance
 51 with this Act by the use of riders and endorsements which have been
 52 approved by the State Board of Insurance or by the filing of new or
 53 revised policy forms for approval by the State Board of Insurance.

54 "[See: -3- --SELECTION--OF--PRACTITIONERS--Any--person--who--is
 55 issued,--who--is--a--party--to,--or--who--is--a--beneficiary--under--any--health
 56 insurance--policy--delivered,--renewed,--or--issued--for--delivery--in--this
 57 state--by--any--insurance--company,--association,--or--organization--to
 58 which--this--article--applies--may--select--a--licensed--doctor--of
 59 podiatric--medicine--or--a--licensed--dentist--to--perform--the--medical--or
 60 surgical--services--or--procedures--scheduled--in--the--policy--which--fall
 61 within--the--scope--of--the--license--of--that--doctor--or--a--licensed--doctor
 62 of--optometry--or--licensed--dentist--to--perform--the--services--or
 63 procedures--scheduled--in--the--policy--which--fall--within--the--scope--of
 64 the--license--of--that--doctor--of--optometry--or--licensed--dentist,--and
 65 payment--or--reimbursement--by--the--insurance--company,--association,--or
 66 organization--for--those--services--or--procedures--in--accordance--with
 67 the--payment--schedule--or--the--payment--provisions--in--the--policy--shall
 68 not--be--denied--because--the--same--were--performed--by--a--licensed--doctor
 69 of--podiatric--medicine,--a--licensed--doctor--of--optometry,--or--a
 70 licensed--dentist,--There--shall--not--be--any--classification,

differentiation, or other discrimination in the payment schedule or the payment provisions in a health insurance policy, nor in the amount or manner of payment or reimbursement thereunder, between scheduled services or procedures when performed by a doctor of podiatric medicine, a doctor of optometry, or a licensed dentist which fall within the scope of his license and the same services or procedures when performed by any other practitioner of the healing arts whose services or procedures are covered by the policy. Any provision in a health insurance policy contrary to or in conflict with the provisions of this article shall, to the extent of the conflict, be void, but such invalidity shall not affect the validity of the other provisions of this policy. Any presently approved policy form containing any provision in conflict with the requirements of this Act may be brought into compliance with this Act by the use of riders and endorsements which have been approved by the State Board of Insurance or by the filing of new or revised policy forms for approval by the State Board of Insurance.]

"Section 4. CERTAIN EXEMPTIONS NOT APPLICABLE. The exemptions and exceptions in Articles 13.09 and 21.41 of the Insurance Code do not apply to this article."

"SECTION 4. This Act takes effect September 1, 1983.

"SECTION 5. The importance of this legislation and the crowded condition of the calendars in both houses create an emergency and an imperative public necessity that the constitutional rule requiring bills to be read on three several days in each house be suspended, and this rule is hereby suspended.

* * * * *

Austin, Texas
April 12, 1983

Hon. William P. Hobby
President of the Senate

Sir:

We, your Committee on Health and Human Resources to which was referred S.B. No. 812, have had the same under consideration, and I am instructed to report it back to the Senate with the recommendation that it do not pass, but that the Committee Substitute adopted in lieu thereof do pass and be printed.

Whitmire, Acting Chairman

BILL ANALYSIS

BY: Brooks

C.S.S.B. 812

BY: BROOKS

Background Information:

Under the existing provisions of the Texas Insurance Code, accident and sickness insurance policies issued or delivered in the state are not required to provide coverage for diagnostic or rehabilitative services for speech, language, or hearing impairments which result from an illness or injury. Therefore, a person suffering such loss or impairment may have to rely on available state-supported services or must personally pay for the cost of such services unless the additional coverage is specified in his or her particular policy.

Additionally, Section 3, Article 21.52, Insurance Code, which provides for the selection of practitioners by the beneficiary of an insurance policy, is unnecessarily duplicated in the present statute.

What the Bill Proposes to Do:

Directs the board to define the terms "sickness" and "injury" to include a loss or impairment of speech, spoken language, language skills, language comprehension, or hearing; adds definitions of audiologist and speech-language pathologist; enables exclusion of coverage for loss of impairment of speech, language, or hearing in specified circumstances; provides that coverage does not need to be provided in or supplemental to renewal policies if the insured previously has rejected such coverage; adds audiologist, speech-language pathologist and licensed dentist to practitioners who may be selected to perform specified services or procedures as scheduled in policy; provides that payment to or reimbursement of aforementioned practitioners shall not be denied or differentiated; deletes unnecessary duplication of provisions.

Section By Section Analysis:

SECTION 1. Amends Subsection (E), Article 3.70-1, Insurance Code, as follows:

(E)(1)(n). Directs the board to define the terms "sickness" and "injury" to include a loss or impairment of speech, spoken language, language skills, language comprehension, or hearing.

SECTION 2. Amends Section 2, Article 3.70-2, Insurance Code, as follows:

Section 2(B). Adds audiologist and speech-language pathologist to the list of terms to be used in the designation of practioners who will and will not be recognized by insurers; defines audiologist and speech-language pathologist.

(F) Adds new subsection which enables specified policies to exclude coverage for loss or impairment of speech, language, or hearing if the insured rejects the coverage in writing on a form promulgated by the board disclosing resultant reduction in premium cost; establishes that such coverage does not need to be provided in or supplemental to a renewal policy if the insured has rejected such coverage previously in a policy issued by the same or an affiliated insurer unless the insured requests such coverage in writing.

SECTION 3. Amends Article 21.52, Insurance Code, as follows:

Section 1. Redesignates definition of licensed dentist as subsection (e) and adds subsection (f) to define audiologist and subsection (g) to define speech-language pathologist.

Section 3. Adds licensed dentist, audiologist, and speech-language pathologist to list of practitioners who may be selected to perform specified services or procedures which are scheduled in insurance policy; maintains that payment or reimbursement for services provided by such practitioners shall not be denied or differentiated; deletes unnecessary duplication of Section 3 as it appears in existing statute.

SECTION 4. Effective date of Act is September 1, 1983.

SECTION 5. Emergency clause.

Rulemaking Authority:

It is the committee's opinion that this bill does not delegate any rulemaking authority.

Fiscal Impact:

The fiscal implications of this bill were considered in the development of the fiscal note by the Legislative Budget Board.

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

March 25, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Senate Bill No. 812
By: Brooks

Sir:

In response to your request for a Fiscal Note on Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance, LBB Staff: JO, JH, SB, bdt

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

April 13, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Committee Substitute for
Senate Bill No. 812

Sir:

In response to your request for a Fiscal Note on Committee Substitute for Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance;
LBB Staff: JO, JH, SB, PA

dentists; amending Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-1, Vernon's Texas Insurance Code), by amending Subsection (E) of Section 1 and amending Subsection (B) of and adding Subsection (F) to Section 2; and amending Article 21.52, Insurance Code.

By Brooks

S.B. No. 812

Substitute the following for S.B.812:

By

[Signature]

C.S.S.B No. 812

A BILL TO BE ENTITLED

1 *the definition of certain terms and to*
AN ACT
2 relating to insurance coverage for the services of certain
3 audiologists, speech pathologists, and language pathologists, and

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

5 SECTION 1. Subsection (E), Section 1, Chapter 397, Acts of
6 the 54th Legislature, Regular Session, 1955 (Article 3.70-1,
7 Vernon's Texas Insurance Code), is amended to read as follows:

8 "(E) Standards for Policy Provisions. (1) The Board shall
9 issue reasonable rules and regulations to establish specific
10 standards including standards for readability of policies and for
11 full and fair disclosure, that set forth the manner, content, and
12 required disclosure for the sale of individual policies of accident
13 and sickness insurance which shall be in addition to and in
14 accordance with applicable laws of this state which may cover but
15 shall not be limited to:

16 "(a) terms of renewability;

17 "(b) initial and subsequent conditions of eligibility;

18 "(c) nonduplication of coverage provisions;

19 "(d) coverage of dependents;

20 "(e) pre-existing conditions;

21 "(f) termination of insurance;

22 "(g) probationary periods;

23 "(h) limitations;

24 "(i) exceptions;

replace House Substitute
[Signature]

4/12/83
4/26/83

" (j) reductions;
" (k) elimination periods;
" (l) requirements for replacement;
" (m) recurrent conditions; and
" (n) the definition of terms including but not limited to the following: hospital, accident, sickness, injury, physician, accidental means, total disability, partial disability, nervous disorder, guaranteed renewable and noncancellable; provided that any definition of hospital so developed shall not be applicable to companies organized under Chapter 20 of this code as amended. The board shall define the terms "sickness" and "injury" to include a loss or impairment of speech, spoken language, language skills, language comprehension, or hearing. "

SECTION 2. Section 2, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas Insurance Code), is amended by amending Subsection (B) and by adding Subsection (F) to read as follows:

" (B) No policy of accident and sickness insurance shall make benefits contingent upon treatment or examination by a particular practitioner or by particular practitioners of the healing arts hereinafter designated unless such policy contains a provision designating the practitioner or practitioners who will be^{2/3} recognized by the insurer and those who will not be recognized by the insurer. Such provision may be located in the "Exceptions" or "Exceptions and Reductions" provisions or elsewhere in the policy, or by endorsement attached to the policy, at the insurer's option. In designating the practitioners who will and will not be recognized, such provision shall use the following terms: Doctor

1 of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor
2 Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist,
3 and Speech-language Pathologist. For purposes of this Act, such
4 designations shall have the following meanings:

5 " Doctor of Medicine: One licensed by the Texas State Board of
6 Medical Examiners on the basis of the degree "Doctor of Medicine";

7 " Doctor of Osteopathy: One licensed by the Texas State Board
8 of Medical Examiners on the basis of the degree of "Doctor of
9 Osteopathy";

10 " Doctor of Dentistry: One licensed by the State Board of
11 Dental Examiners;

12 " Doctor of Chiropractic: One licensed by the Texas Board of
13 Chiropractic Examiners;

14 " Doctor of Optometry: One licensed by the Texas State Board
15 of Examiners in Optometry; [and]

16 " Doctor of Podiatry: One licensed by the State Board of
17 Chiropody Examiners;

18 " Audiologist: One with a master's or doctorate degree in
19 audiology from an accredited college or university and who is^{3/4}
20 certified by the American Speech and Hearing Association; and

21 " Speech-language Pathologist: One with a master's or
22 doctorate degree in speech pathology or speech-language pathology
23 from an accredited college or university and who is certified by
24 the American Speech and Hearing Association.

25 "(F) An individual policy or group policy of accident and
26 sickness insurance, including a policy issued by a corporation
27 subject to Chapter 20, Insurance Code, that is delivered or issued

for delivery to any person in this state may ~~exclude~~ ^{exclude}

loss or impairment of speech, language, or hearing from the sickness or injury covered thereby where any insured named in the policy rejects the coverage in writing on a form promulgated by the board disclosing the reduction in premium cost resulting from such rejection. Such coverage need not be provided in or supplemental to a renewal policy if the named insured has rejected the coverage in connection with a policy previously issued to him by the same insurer or by an affiliated insurer unless such insured has ~~requested~~ ^{requested} such coverage in writing."

SECTION 3. Article 21.52, Insurance Code, is amended to read as follows:

"Article 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH AND ACCIDENT POLICIES.

"Section 1. DEFINITIONS. As used in this article:

"(a) 'health insurance policy' means any individual, group, blanket, or franchise insurance policy, insurance agreement, or group hospital service contract, providing benefits for medical or ^{4/5} surgical expenses incurred as a result of an accident or sickness;

"(b) 'doctor of podiatric medicine' includes D.P.M., podiatrist, doctor of surgical ^{C/M} chiropody, D.S.C. and chiropodist;

"(c) 'doctor of optometry' includes optometrist, doctor of optometry, and O.D.; [and]

"(d) 'doctor of chiropractic' means a person who is licensed by the Texas Board of Chiropractic Examiners to practice chiropractic; [and]

"(e) [and] 'licensed dentist' means a person who is licensed to practice dentistry by the State Board of dental Examiners;

"(f) 'audiologist' means a person who has received a master's or doctorate degree in audiology from an accredited college or university and is certified by the American Speech and Hearing Association; and

"(g) 'speech-language pathologist' means a person who is certified by the American Speech and Hearing Association to restore speech loss or correct a speech impairment."

1 "Sec^{tion} 2. APPLICATION OF THIS ARTICLE. This article applies
2 to and embraces all insurance companies, associations, and
3 organizations, whether incorporated or not, which provide health
4 benefits, accident benefits, or health and accident benefits for
5 medical or surgical expenses incurred as a result of an accident or
6 sickness. Without limiting the foregoing, this article
7 specifically applies to the insurance companies, associations, and
8 organizations which come within the purview of the following
9 designated chapters of the Insurance Code: Chapter 3, pertaining^{5/6}
10 to life, health and accident insurance companies; Chapter 8,
11 pertaining to general casualty companies; Chapter 10, pertaining to
12 fraternal benefit societies; Chapter 11, pertaining to mutual life
13 insurance companies; Chapter 12, pertaining to local mutual aid
14 associations; Chapters 13 and 14, pertaining to statewide mutual
15 assessment companies, mutual assessment companies, and mutual
16 assessment life, health and accident associations; Chapter 15,
17 pertaining to mutual insurance companies writing other than life
18 insurance; Chapter 18, pertaining to underwriters making insurance
19 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
20 exchanges; and Chapter 22, pertaining to stipulated premium
21 insurance companies. This article also applies to health
22 maintenance organizations established pursuant to Chapter 214, Acts
23 of the 64th Legislature, Regular Session, 1975 (Articles
24 20A.01-20A.33^{HA}, Insurance Code), as now or hereafter amended.

25 "Sec^{tion} 3. SELECTION OF PRACTITIONERS. Any person who is
26 issued, who is a party to, or who is a beneficiary under any health
27 insurance policy delivered, renewed, or issued for delivery in this

1 state by any insurance company, association, or organization to
2 which this article applies may select a licensed doctor of
3 podiatric medicine, a licensed dentist, or a doctor of chiropractic
4 to perform the medical or surgical services or procedures scheduled
5 in the policy which fall within the scope of the license of that
6 practitioner, ~~[deeter-or]~~ a licensed doctor of optometry to perform
7 the services or procedures scheduled in the policy which fall
8 within the scope of the license of that doctor of optometry, an⁶/₁
9 audiologist to measure hearing for the purpose of determining the
10 presence or extent of a hearing loss and to provide aural
11 rehabilitation services to a person with a hearing loss if those
12 services or procedures are scheduled in the policy, or a
13 speech-language pathologist to evaluate speech and language and to
14 provide habilitative and rehabilitative services to restore speech
15 or language loss or to correct a speech or language impairment if
16 those services or procedures are scheduled in the policy. The
17 [and] payment or reimbursement by the insurance company,
18 association, or organization for those services or procedures in
19 accordance with the payment schedule or the payment provisions in
20 the policy shall not be denied because the same were performed by a
21 licensed doctor of podiatric medicine, a licensed doctor of
22 optometry, [or] a licensed doctor of chiropractic, a licensed
23 dentist, an audiologist, or a speech-language pathologist. There
24 shall not be any classification, differentiation, or other
25 discrimination in the payment schedule or the payment provisions in
26 a health insurance policy, nor in the amount or manner of payment
27 or reimbursement thereunder, between scheduled services or

1 procedures when performed by a doctor of podiatric medicine, a
2 doctor of optometry, [or] a doctor of chiropractic, a licensed
3 dentist, an audiologist, or a speech-language pathologist which
4 fall within the scope of his license or certification and the same
5 services or procedures when performed by any other practitioner of
6 the healing arts whose services or procedures are covered by the
7 policy. Any provision in a health insurance policy contrary to or ^{1/8}
8 in conflict with the provisions of this article shall, to the
9 extent of the conflict, be void, but such invalidity shall not
10 affect the validity of the other provisions of this policy. Any
11 presently approved policy form containing any provision in conflict
12 with the requirements of this Act shall be brought into compliance
13 with this Act by the use of riders and endorsements which have been
14 approved by the State Board of Insurance or by the filing of new or
15 revised policy forms for approval by the State Board of Insurance.

16 ~~\\ [Section 3. --- SELECTION --- OF --- PRACTITIONERS --- Any person who is~~
17 ~~issued, who is a party to, or who is a beneficiary under any health~~
18 ~~insurance policy delivered, renewed, or issued for delivery in this~~
19 ~~state by any insurance company, association, or organization to~~
20 ~~which this article applies may select a licensed doctor of~~
21 ~~podiatric medicine or a licensed dentist to perform the medical or~~
22 ~~surgical services or procedures scheduled in the policy which fall~~
23 ~~within the scope of the license of that doctor or a licensed doctor~~
24 ~~of optometry or licensed dentist to perform the services or~~
25 ~~procedures scheduled in the policy which fall within the scope of~~
26 ~~the license of that doctor of optometry or licensed dentist, and~~
27 ~~payment or reimbursement by the insurance company, association, or~~

1 organization-for-these-services-or-procedures--in--accordance--with
 2 the--payment-schedule-or-the-payment-provisions-in-the-policy-shall
 3 not-be-denied-because-the-same-were-performed-by-a-licensed--doctor
 4 of--pediatric--medicine;--a--licensed--doctor--of--optometry;--or-a
 5 licensed--dentist;---There--shall--not---be---any---classification;
 6 differentiation;--or-other-discrimination-in-the-payment-schedule-or^{8/9}
 7 the--payment--provisions--in--a-health-insurance-policy;--nor-in-the
 8 amount-or-manner-of-payment-or--reimbursement--thereunder;--between
 9 scheduled--services--or--procedures--when--performed-by-a-doctor-of
 10 pediatric-medicine;--a-doctor-of-optometry;--or--a--licensed--dentist
 11 which-fall-within-the-scope-of-his-license-and-the-same-services-or
 12 procedures--when-performed-by-any-other-practitioner-of-the-healing
 13 arts-whose-services-or-procedures-are-covered-by-the--policy;---Any
 14 provision--in--a-health-insurance-policy-contrary-to-or-in-conflict
 15 with-the-provisions-of-this-article-shall;--to--the--extent--of--the
 16 conflict;--be--void;--but--such--invalidity--shall--not--affect-the
 17 validity-of-the-other-provisions-of--this--policy;---Any--presently
 18 approved--policy-form-containing-any-provision-in-conflict-with-the
 19 requirements-of-this-Act-may-be-brought-into-compliance--with--this
 20 Act--by-the-use-of-riders-and-endorsements-which-have-been-approved
 21 by-the-State-Board-of-Insurance-or-by-the-filing-of-new-or--revised
 22 policy-forms-for-approval-by-the-State-Board-of-Insurance;]

23 " Sec^h 4. CERTAIN EXEMPTIONS NOT APPLICABLE. The exemptions
 24 and exceptions in Articles 13.09 and 21.41 of the Insurance Code do
 25 not apply to this article. "

26 SECTION 4. This Act takes effect September 1, 1983.

27 SECTION 5. The importance of this legislation and the

1 crowded condition of the calendars in both houses create an
2 emergency and an imperative public necessity that the
3 constitutional rule requiring bills to be read on three several
4 days in each house be suspended, and this rule is hereby suspended.

April 26 1983 Engrossed
Daisy Spaw
Engrossing Clerk

I certify that the attached is a true and correct
copy of _____ which was
received from the Senate on APR 27 1983 and
referred to the Committee on _____

Betty Murray
Chief Clerk of the House

100 APR 27 AM 10:53
HOUSE OF REPRESENTATIVES

By Brooks

S.B. No. 812

A BILL TO BE ENTITLED

AN ACT

relating to the definition of certain terms and to insurance
coverage for the services of certain audiologists, speech
pathologists, language pathologists, and dentists; amending Chapter
397, Acts of the 54th Legislature, Regular Session, 1955 (Article
3.70-1, Vernon's Texas Insurance Code), by amending Subsection (E)
of Section 1 and amending Subsection (B) of and adding Subsection
(F) to Section 2; and amending Article 21.52, Insurance Code.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subsection (E), Section 1, Chapter 397, Acts of
the 54th Legislature, Regular Session, 1955 (Article 3.70-1,
Vernon's Texas Insurance Code), is amended to read as follows:

"(E) Standards for Policy Provisions. (1) The Board shall
issue reasonable rules and regulations to establish specific
standards including standards for readability of policies and for
full and fair disclosure, that set forth the manner, content, and
required disclosure for the sale of individual policies of accident
and sickness insurance which shall be in addition to and in
accordance with applicable laws of this state which may cover but
shall not be limited to:

"(a) terms of renewability;

"(b) initial and subsequent conditions of eligibility;

"(c) nonduplication of coverage provisions;

"(d) coverage of dependents;

"(e) pre-existing conditions;

1 "(f) termination of insurance;

2 "(g) probationary periods;

3 "(h) limitations;

4 "(i) exceptions;

5 "(j) reductions;

6 "(k) elimination periods;

7 "(l) requirements for replacement;

8 "(m) recurrent conditions; and

9 "(n) the definition of terms including but not limited to

10 the following: hospital, accident, sickness, injury, physician,
11 accidental means, total disability, partial disability, nervous
12 disorder, guaranteed renewable and noncancellable; provided that
13 any definition of hospital so developed shall not be applicable to
14 companies organized under Chapter 20 of this code as amended. The
15 board shall define the terms 'sickness' and 'injury' to include a
16 loss or impairment of speech, spoken language, language skills,
17 language comprehension, or hearing."

18 SECTION 2. Section 2, Chapter 397, Acts of the 54th
19 Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas
20 Insurance Code), is amended by amending Subsection (B) and by
21 adding Subsection (F) to read as follows:

22 "(B) No policy of accident and sickness insurance shall make
23 benefits contingent upon treatment or examination by a particular
24 practitioner or by particular practitioners of the healing arts
25 hereinafter designated unless such policy contains a provision
26 designating the practitioner or practitioners who will be

1 recognized by the insurer and those who will not be recognized by
 2 the insurer. Such provision may be located in the 'Exceptions' or
 3 'Exceptions and Reductions' provisions or elsewhere in the policy,
 4 or by endorsement attached to the policy, at the insurer's option.
 5 In designating the practitioners who will and will not be
 6 recognized, such provision shall use the following terms: Doctor
 7 of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor of
 8 Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist,
 9 and Speech-language Pathologist. For purposes of this Act, such
 10 designations shall have the following meanings:

11 "Doctor of Medicine: One licensed by the Texas State Board
 12 of Medical Examiners on the basis of the degree 'Doctor of
 13 Medicine';

14 "Doctor of Osteopathy: One licensed by the Texas State Board
 15 of Medical Examiners on the basis of the degree of 'Doctor of
 16 Osteopathy';

17 "Doctor of Dentistry: One licensed by the State Board of
 18 Dental Examiners;

19 "Doctor of Chiropractic: One licensed by the Texas Board of
 20 Chiropractic Examiners;

21 "Doctor of Optometry: One licensed by the Texas State Board
 22 of Examiners in Optometry; [and]

23 "Doctor of Podiatry: One licensed by the State Board of
 24 Chiropody Examiners;

25 "Audiologist: One with a master's or doctorate degree in
 26 audiology from an accredited college or university and who is

1 certified by the American Speech and Hearing Association; and

2 "Speech-language Pathologist: One with a master's or
3 doctorate degree in speech pathology or speech-language pathology
4 from an accredited college or university and who is certified by
5 the American Speech and Hearing Association.

6 "(F) An individual policy or group policy of accident and
7 sickness insurance, including a policy issued by a corporation
8 subject to Chapter 20, Insurance Code, that is delivered or issued
9 for delivery to any person in this state may exclude loss or
10 impairment of speech, language, or hearing from the sickness or
11 injury covered thereby where any insured named in the policy
12 rejects the coverage in writing on a form promulgated by the board
13 disclosing the reduction in premium cost resulting from such
14 rejection. Such coverage need not be provided in or supplemental
15 to a renewal policy if the named insured has rejected the coverage
16 in connection with a policy previously issued to him by the same
17 insurer or by an affiliated insurer unless such insured has
18 requested such coverage in writing."

19 SECTION 3. Article 21.52, Insurance Code, is amended to read
20 as follows:

21 "Article 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH
22 AND ACCIDENT POLICIES.

23 "Section 1. DEFINITIONS. As used in this article:

24 "(a) 'health insurance policy' means any individual, group,
25 blanket, or franchise insurance policy, insurance agreement, or
26 group hospital service contract, providing benefits for medical or

1 surgical expenses incurred as a result of an accident or sickness;

2 "(b) 'doctor of podiatric medicine' includes D.P.M.,
3 podiatrist, doctor of surgical chiropody, D.S.C., and chiropodist;

4 "(c) 'doctor of optometry' includes optometrist, doctor of
5 optometry, and O.D.; [and]

6 "(d) 'doctor of chiropractic' means a person who is licensed
7 by the Texas Board of Chiropractic Examiners to practice
8 chiropractic; [and]

9 "(e) [~~d~~] 'licensed dentist' means a person who is licensed
10 to practice dentistry by the State Board of Dental Examiners;

11 "(f) 'audiologist' means a person who has received a
12 master's or doctorate degree in audiology from an accredited
13 college or university and is certified by the American Speech and
14 Hearing Association; and

15 "(g) 'speech-language pathologist' means a person who is
16 certified by the American Speech and Hearing Association to restore
17 speech loss or correct a speech impairment.

18 "Section 2. APPLICATION OF THIS ARTICLE. This article
19 applies to and embraces all insurance companies, associations, and
20 organizations, whether incorporated or not, which provide health
21 benefits, accident benefits, or health and accident benefits for
22 medical or surgical expenses incurred as a result of an accident or
23 sickness. Without limiting the foregoing, this article
24 specifically applies to the insurance companies, associations, and
25 organizations which come within the purview of the following
26 designated chapters of the Insurance Code: Chapter 3, pertaining

1 to life, health and accident insurance companies; Chapter 8,
2 pertaining to general casualty companies; Chapter 10, pertaining to
3 fraternal benefit societies; Chapter 11, pertaining to mutual life
4 insurance companies; Chapter 12, pertaining to local mutual aid
5 associations; Chapters 13 and 14, pertaining to statewide mutual
6 assessment companies, mutual assessment companies, and mutual
7 assessment life, health and accident associations; Chapter 15,
8 pertaining to mutual insurance companies writing other than life
9 insurance; Chapter 18, pertaining to underwriters making insurance
10 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
11 exchanges; and Chapter 22, pertaining to stipulated premium
12 insurance companies. This article also applies to health
13 maintenance organizations established pursuant to Chapter 214, Acts
14 of the 64th Legislature, Regular Session, 1975 (Articles
15 20A.01-20A.33, Insurance Code), as now or hereafter amended.

16 "Section 3. SELECTION OF PRACTITIONERS. Any person who is
17 issued, who is a party to, or who is a beneficiary under any health
18 insurance policy delivered, renewed, or issued for delivery in this
19 state by any insurance company, association, or organization to
20 which this article applies may select a licensed doctor of
21 podiatric medicine, a licensed dentist, or a doctor of chiropractic
22 to perform the medical or surgical services or procedures scheduled
23 in the policy which fall within the scope of the license of that
24 practitioner, ~~[deeter-er]~~ a licensed doctor of optometry to perform
25 the services or procedures scheduled in the policy which fall
26 within the scope of the license of that doctor of optometry, an

1 audiologist to measure hearing for the purpose of determining the
 2 presence or extent of a hearing loss and to provide aural
 3 rehabilitation services to a person with a hearing loss if those
 4 services or procedures are scheduled in the policy, or a
 5 speech-language pathologist to evaluate speech and language and to
 6 provide habilitative and rehabilitative services to restore speech
 7 or language loss or to correct a speech or language impairment if
 8 those services or procedures are scheduled in the policy. The
 9 [and] payment or reimbursement by the insurance company,
 10 association, or organization for those services or procedures in
 11 accordance with the payment schedule or the payment provisions in
 12 the policy shall not be denied because the same were performed by a
 13 licensed doctor of podiatric medicine, a licensed doctor of
 14 optometry, [or] a licensed doctor of chiropractic, a licensed
 15 dentist, an audiologist, or a speech-language pathologist. There
 16 shall not be any classification, differentiation, or other
 17 discrimination in the payment schedule or the payment provisions in
 18 a health insurance policy, nor in the amount or manner of payment
 19 or reimbursement thereunder, between scheduled services or
 20 procedures when performed by a doctor of podiatric medicine, a
 21 doctor of optometry, [or] a doctor of chiropractic, a licensed
 22 dentist, an audiologist, or a speech-language pathologist which
 23 fall within the scope of his license or certification and the same
 24 services or procedures when performed by any other practitioner of
 25 the healing arts whose services or procedures are covered by the
 26 policy. Any provision in a health insurance policy contrary to or

1 in conflict with the provisions of this article shall, to the
 2 extent of the conflict, be void, but such invalidity shall not
 3 affect the validity of the other provisions of this policy. Any
 4 presently approved policy form containing any provision in conflict
 5 with the requirements of this Act shall be brought into compliance
 6 with this Act by the use of riders and endorsements which have been
 7 approved by the State Board of Insurance or by the filing of new or
 8 revised policy forms for approval by the State Board of Insurance.

9 "[See-3--SELECTION-OF-PRACTITIONERS---Any--person--who--is
 10 issued--who-is-a-party-to--or-who-is-a-beneficiary-under-any-health
 11 insurance-policy-delivered--renewed--or-issued-for-delivery-in-this
 12 state--by--any--insurance--company--association--or-organization-to
 13 which--this--article--applies--may--select--a--licensed--doctor--of
 14 pediatric--medicine-or-a-licensed-dentist-to-perform-the-medical-or
 15 surgical-services-or-procedures-scheduled-in-the-policy-which--fall
 16 within-the-scope-of-the-license-of-that-doctor-or-a-licensed-doctor
 17 of--optometry--or--licensed--dentist--to--perform--the--services-or
 18 procedures-scheduled-in-the-policy-which-fall-within-the--scope--of
 19 the--license--of--that-doctor-of-optometry-or-licensed-dentist--and
 20 payment-or-reimbursement-by-the-insurance-company--association--or
 21 organization--for--these--services-or-procedures-in-accordance-with
 22 the-payment-schedule-or-the-payment-provisions-in-the-policy--shall
 23 not--be-denied-because-the-same-were-performed-by-a-licensed-doctor
 24 of-pediatric--medicine--a--licensed--doctor--of--optometry--or--a
 25 licensed--dentist---There---shall--not--be--any--classification,
 26 differentiation--or-ether-discrimination-in-the-payment-schedule-or

1 the-payment-provisions-in-a-health-insurance-policy;--nor--in--the
 2 amount--or--manner--of-payment-or-reimbursement-thereunder;--between
 3 scheduled-services-or-procedures-when--performed--by--a--doctor--of
 4 pediatrics--medicine;--a--doctor-of-optometry;--or-a-licensed-dentist
 5 which-fall-within-the-scope-of-his-license-and-the-same-services-or
 6 procedures-when-performed-by-any-other-practitioner-of-the--healing
 7 arts--whose--services-or-procedures-are-covered-by-the-policy;--Any
 8 provision-in-a-health-insurance-policy-contrary-to-or--in--conflict
 9 with--the--provisions--of--this-article-shall;--to-the-extent-of-the
 10 conflict;--be--void;--but--such--invalidity--shall--not--affect--the
 11 validity--of--the--other--provisions-of-this-policy;--Any-presently
 12 approved-policy-form-containing-any-provision-in-conflict-with--the
 13 requirements--of--this-Act-may-be-brought-into-compliance-with-this
 14 Act-by-the-use-of-riders-and-endorsements-which-have-been--approved
 15 by--the-State-Board-of-Insurance-or-by-the-filing-of-new-or-revised
 16 policy-forms-for-approval-by-the-State-Board-of-Insurance.]

17 "Section 4. CERTAIN EXEMPTIONS NOT APPLICABLE. The
 18 exemptions and exceptions in Articles 13.09 and 21.41 of the
 19 Insurance Code do not apply to this article."

20 "SECTION 4. This Act takes effect September 1, 1983.

21 "SECTION 5. The importance of this legislation and the
 22 crowded condition of the calendars in both houses create an
 23 emergency and an imperative public necessity that the
 24 constitutional rule requiring bills to be read on three several
 25 days in each house be suspended, and this rule is hereby suspended.

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

April 13, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Committee Substitute for
Senate Bill No. 812

Sir:

In response to your request for a Fiscal Note on Committee Substitute for Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance;
LBB Staff: JO, JH, SB, PA

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

March 25, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Senate Bill No. 812
By: Brooks

Sir:

In response to your request for a Fiscal Note on Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance, LBB Staff: JO, JH, SB, bdt

6

HOUSE COMMITTEE REPORT

1993 MAY 16 AM 10:22

REPRESENTATIVES

1st Printing

By Brooks
(Smith of Harris)

S.B. No. 812

Substitute the following for S.B. No. 812:

By Smith of Harris

C.S.S.B. No. 812

A BILL TO BE ENTITLED

1 AN ACT

2 relating to insurance coverage for the services of certain
3 audiologists, speech pathologists, and language pathologists.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

5 SECTION 1. Section 2, Chapter 397, Acts of the 54th
6 Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas
7 Insurance Code), is amended by amending Subsection (B) and adding
8 Subsection (F) to read as follows:

9 (B) No policy of accident and sickness insurance shall make
10 benefits contingent upon treatment or examination by a particular
11 practitioner or by particular practitioners who will be recognized
12 by the insurer and those who will not be recognized by this
13 insurer. Such provision may be located in the "Exceptions" or
14 "Exceptions and Reductions" provisions or elsewhere in the policy,
15 or by endorsement attached to the policy, at the insurer's option.
16 In designating the practitioners who will and will not be
17 recognized, such provision shall use the following terms: Doctor
18 of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor of
19 Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist,
20 and Speech-language Pathologist. For purposes of this Act, such
21 designations shall have the following meanings:

22 Doctor of Medicine: One licensed by the Texas State Board of
23 Medical Examiners on the basis of the degree of "Doctor of
24 Medicine";

1 Doctor of Osteopathy: One licensed by the Texas State Board
2 of Medical Examiners on the basis of the degree of "Doctor of
3 Osteopathy";

4 Doctor of Dentistry: One licensed by the State Board of
5 Dental Examiners;

6 Doctor of Chiropractic: One licensed by the Texas Board of
7 Chiropractic Examiners;

8 Doctor of Optometry: One licensed by the Texas State Board
9 of Examiners in Optometry; [and]

10 Doctor of Podiatry: One licensed by the State Board of
11 Chiropody Examiners;

12 Audiologist: One with a master's or doctorate degree in
13 audiology from an accredited college or university and who is
14 certified by the American Speech-language and Hearing Association;
15 and

16 Speech-language Pathologist: One with a master's or
17 doctorate degree in speech pathology or speech-language pathology
18 from an accredited college or university and who is certified by
19 the American Speech-language and Hearing Association.

20 (F) Insurers, nonprofit hospital and medical service plan
21 corporations subject to Chapter 20 of this code, and health
22 maintenance organizations transacting health insurance or providing
23 other health coverage in this state shall offer and make available,
24 under group policies, contracts, and plans providing hospital and
25 medical coverage on an expense incurred, service or prepaid basis,
26 benefits for the necessary care and treatment of loss or impairment
27 of speech or hearing that are not less favorable than for physical

1 illness generally, subject to the same durational limits, dollar
2 limits, deductibles, and coinsurance factors. Such offer of
3 benefits shall be subject to the right of the group policy or
4 contract holder to reject the coverage or to select any alternative
5 level of benefits if such right is offered by or negotiated with
6 such insurer, service plan corporation, or health maintenance
7 organization.

8 SECTION 2. Article 21.52, Insurance Code, is amended to read
9 as follows:

10 Art. 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH AND
11 ACCIDENT POLICIES. Sec. 1. DEFINITIONS. As used in this Article:

12 (a) "health insurance policy" means any individual, group,
13 blanket, or franchise insurance policy, insurance agreement, or
14 group hospital service contract, providing benefits for medical or
15 surgical expenses incurred as a result of an accident or sickness;

16 (b) "doctor of podiatric medicine" includes D.P.M.,
17 podiatrist, doctor of surgical chiropody, D.S.C. and chiropodist;

18 (c) "doctor of optometry" includes optometrist, doctor of
19 optometry, and O.D.; [and]

20 (d) "doctor of chiropractic" means a person who is licensed
21 by the Texas Board of Chiropractic Examiners to practice
22 chiropractic;[-]

23 (e) [~~d~~] "licensed dentist" means a person who is licensed
24 to practice dentistry by the State Board of Dental Examiners;

25 (f) "audiologist" means a person who has received a master's
26 or doctorate degree in audiology from an accredited college or
27 university and is certified by the American Speech-language and

1 Hearing Association; and

2 (g) "speech-language pathologist" means a person who has
 3 received a master's or doctorate degree in speech-language
 4 pathology from an accredited college or university and is certified
 5 by the American Speech-language and Hearing Association to restore
 6 speech loss or correct a speech impairment.

7 Sec. 2. APPLICATION OF THIS ARTICLE. This article applies
 8 to and embraces all insurance companies, associations, and
 9 organizations, whether incorporated or not, which provide health
 10 benefits, accident benefits, or health and accident benefits for
 11 medical or surgical expenses incurred as a result of an accident or
 12 sickness. Without limiting the foregoing, this article
 13 specifically applies to the insurance companies, associations, and
 14 organizations which come within the purview of the following
 15 designated chapters of the Insurance Code: Chapter 3, pertaining
 16 to life, health and accident insurance companies; Chapter 8,
 17 pertaining to general casualty companies; Chapter 10, pertaining to
 18 fraternal benefit societies; Chapter 11, pertaining to mutual life
 19 insurance companies; Chapter 12, pertaining to local mutual aid
 20 associations; Chapters 13 and 14, pertaining to statewide mutual
 21 assessment companies, mutual assessment companies, and mutual
 22 assessment life, health and accident associations; Chapter 15,
 23 pertaining to mutual insurance companies writing other than life
 24 insurance; Chapter 18, pertaining to underwriters making insurance
 25 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
 26 exchanges; and Chapter 22, pertaining to stipulated premium
 27 insurance companies. This article also applies to health

1 maintenance organizations established pursuant to Chapter 214, Acts
2 of the 64th Legislature, Regular Session, 1975 (Articles
3 20A.01-20A.33., Insurance Code), as now or hereafter amended.

4 Sec. 3. SELECTION OF PRACTITIONERS. Any person who is
5 issued, who is a party to, or who is a beneficiary under any health
6 insurance policy delivered, renewed, or issued for delivery in this
7 state by any insurance company, association, or organization to
8 which this article applies may select a licensed doctor of
9 podiatric medicine, a licensed dentist, or a doctor of chiropractic
10 to perform the medical or surgical services or procedures scheduled
11 in the policy which fall within the scope of the license of that
12 practitioner, [deeter-er] a licensed doctor of optometry to perform
13 the services or procedures scheduled in the policy which fall
14 within the scope of the license of that doctor of optometry, an
15 audiologist to measure hearing for the purpose of determining the
16 presence or extent of a hearing loss and to provide aural
17 rehabilitation services to a person with a hearing loss if those
18 services or procedures are scheduled in the policy, or a
19 speech-language pathologist to evaluate speech and language and to
20 provide habilitative and rehabilitative services to restore speech
21 or language loss or to correct a speech or language impairment if
22 those services or procedures are scheduled in the policy. The
23 [and] payment or reimbursement by the insurance company,
24 association or organization for those services or procedures in
25 accordance with the payment schedule or the payment provisions in
26 the policy shall not be denied because the same were performed by a
27 licensed doctor of podiatric medicine, a licensed doctor of

1 optometry, [or] a licensed doctor of chiropractic, a licensed
 2 dentist, an audiologist, or a speech-language pathologist. There
 3 shall not be any classification, differentiation, or other
 4 discrimination in the payment schedule or the payment provisions in
 5 a health insurance policy, nor in the amount or manner of payment
 6 or reimbursement thereunder, between scheduled services or
 7 procedures when performed by a doctor of podiatric medicine, a
 8 doctor of optometry, [or] a doctor of chiropractic, a licensed
 9 dentist, an audiologist, or a speech-language pathologist which
 10 fall within the scope of his license or certification and the same
 11 services or procedures when performed by any other practitioner of
 12 the healing arts whose services or procedures are covered by the
 13 policy. Any provision in a health insurance policy contrary to or
 14 in conflict with the provisions of this article shall, to the
 15 extent of the conflict, be void, but such invalidity shall not
 16 affect the validity of the other provisions of this policy. Any
 17 presently approved policy form containing any provision in conflict
 18 with the requirements of this Act shall be brought into compliance
 19 with this Act by the use of riders and endorsements which have been
 20 approved by the State Board of Insurance or by the filing of new or
 21 revised policy forms for approval by the State Board of Insurance.

22 [See-3- --SELECTION--OF--PRACTITIONERS- ---Any--person--who-is
 23 issued,-who-is-a-party-to,-or-who-is-a-beneficiary-under-any-health
 24 insurance-policy-delivered,-renewed,-or-issued-for-delivery-in-this
 25 state-by-any-insurance-company,-association,-or-organization--to
 26 which--this--article--applies--may--select--a--licensed--doctor--of
 27 podiatric-medicine-or-a-licensed-dentist-to-perform-the-medical--or

1 surgical--services-or-procedures-scheduled-in-the-policy-which-fall
2 within-the-scope-of-the-license-of-that-doctor-or-a-licensed-doctor
3 of-optometry--or--licensed--dentist--to--perform--the--services--or
4 procedures--scheduled--in-the-policy-which-fall-within-the-scope-of
5 the-license-of-that-doctor-of-optometry-or--licensed--dentist,--and
6 payment--or-reimbursement-by-the-insurance-company,--association,--or
7 organization-for-these-services-or-procedures--in--accordance--with
8 the--payment-schedule-or-the-payment-provisions-in-the-policy-shall
9 not-be-denied-because-the-same-were-performed-by-a-licensed--doctor
10 of--podiatric--medicine,--a--licensed--doctor--of--optometry,--or-a
11 licensed--dentist,---There--shall--not---be---any---classification,
12 differentiation,--or-other-discrimination-in-the-payment-schedule-or
13 the--payment--provisions--in--a-health-insurance-policy,--nor-in-the
14 amount-or-manner-of-payment-or--reimbursement--thereunder,--between
15 scheduled--services--or--procedures--when--performed-by-a-doctor-of
16 podiatric-medicine,--a-doctor-of-optometry,--or--a--licensed--dentist
17 which-fall-within-the-scope-of-his-license-and-the-same-services-or
18 procedures--when-performed-by-any-other-practitioner-of-the-healing
19 arts-whose-services-or-procedures-are-covered-by-the--policy,---Any
20 provision--in--a-health-insurance-policy-contrary-to-or-in-conflict
21 with-the-provisions-of-this-article-shall,--to--the--extent--of--the
22 conflict,--be--void,--but--such--invalidity--shall--not--affect-the
23 validity-of-the-other-provisions-of--this--policy,---Any--presently
24 approved--policy-form-containing-any-provision-in-conflict-with-the
25 requirements-of-this-Act-may-be-brought-into-compliance--with--this
26 Act--by-the-use-of-riders-and-endorsements-which-have-been-approved
27 by-the-State-Board-of-Insurance-or-by-the-filing-of-new-or--revised

1 ~~policy-forms-for-approval-by-the-State-Board-of-Insurance-~~]

2 SECTION 3. CERTAIN EXEMPTIONS NOT APPLICABLE. The
3 exemptions and exceptions in Articles 13.09 and 21.41 of the
4 Insurance Code do not apply to this article.

5 SECTION 4. This Act takes effect September 1, 1983.

6 SECTION 5. The importance of this legislation and the
7 crowded condition of the calendars in both houses create an
8 emergency and an imperative public necessity that the
9 constitutional rule requiring bills to be read on three several
10 days in each house be suspended and this rule is hereby suspended.

COMMITTEE REPORT

The Honorable Gib Lewis
Speaker of the House of Representatives

May 12, 1983
(date)

Sir:

We, your COMMITTEE ON INSURANCE, to whom was referred S. B. 812 have had the same under
consideration and beg to report back with the recommendation that it (measure)

- ☐ do pass, without amendment.
- ☐ do pass, with amendment(s).
- ☒ do pass and be not printed; a Complete Committee Substitute is recommended in lieu of the original measure.

A fiscal note was requested. ☒ yes ☐ no

An author's fiscal statement was requested. ☐ yes ☒ no

An actuarial analysis was requested. ☐ yes ☒ no

The Committee recommends that this measure be placed on the ~~(1-2-83)~~ or ~~(6-2-83)~~ Calendar.

This measure ☒ proposes new law.
☒ amends existing law.

House Sponsor of Senate Measure Smith of Harris

The measure was reported from Committee by the following vote:

	AYE	NAY	PNV	ABSENT
Simpson, Ch.			C	
Green, V.C.	✓			
Smith, A., C.B.O.	✓			
Gavin	✓			
Lee, D.		✓		
Oliver				✓
Patrick	✓			
Robinson				✓
Shea	✓			

Total 5 aye
1 nay
1 present, not voting
2 absent

[Signature]
CHAIRMAN
[Signature]
COMMITTEE COORDINATOR

BILL ANALYSIS

Background Information

Subsection (B) of Article 3.70-2, Texas Insurance Code, prohibits accident and sickness insurance policies from making benefits contingent on treatment or examination by a particular practitioner or by particular practitioners unless a provision designating those who will and who will not be recognized is contained in the policy. Subsection (B) lists and defines the practitioners to be included and/or excluded.

Article 21.52, Texas Insurance Code, grants the right of insureds to select practitioners under health and accident policies. The article was amended by the 66th Legislature to include chiropractors and dentists. In amending the article, two Subsections (d) were added to Section (1) of the article as were two sections numbered (3).

Purpose and Synopsis

C.S.S.B. 812 amends Article 3.70-2 by amending Subsection (B) to include audiologists and speech-language pathologists in the list of practitioners. Subsection (F) is added to the article to require insurers, nonprofit hospital and medical service plan corporations subject to Chapter 20 of the Insurance Code, and health maintenance organizations transacting health insurance or providing other health coverage in Texas to offer and provide benefits for the care and treatment of loss or impairment of speech and hearing. These benefits would be offered under group policies, contracts, and plans providing hospital and medical coverage on an expense incurred, service or prepaid basis. The benefits would not be less than those for physical illness generally and would have the same limits as for physical illness on duration, deductions, expenses, and coinsurance. Subsection (F) provides that the group policy or contract holder may reject the coverage or select alternative levels of coverage if offered by or negotiated with the insurer.

Article 21.52, Insurance Code, is amended to include audiologists and speech-language pathologists in the definitions in Section 1. The section is also amended to eliminate the duplication of Subsection (d).

One of the two Section 3's of Article 21.52, Insurance Code, is deleted by S.B. 812. The remaining Section 3 is amended to include licensed dentists (which was included in the deleted Section 3), audiologists, and speech-language pathologists in practitioners who may be selected by the insured within specific limitations.

Rulemaking Authority

It is the committee's opinion that this bill does not delegate rulemaking authority to any state officer, department, agency, or institution.

Differences Between S.B. 812 and C.S.S.B. 812

S.B. 812 adds language to Article 3.70-1, Texas Insurance Code, directing the State Board of Insurance to include "loss or impairment of speech, spoken language, language skills, language comprehension, or hearing" in its definitions of "sickness" and "injury". C.S.S.B. 812 does not amend Article 3.70-1.

S.B. 812 adds Subsection (F) to Article 3.70-2 to permit treatment of loss or impairment of speech, language, or hearing to be excluded from coverage in individual or group policies of accident and sickness insurance if such coverage is rejected in writing by the insured. The rejection must be on a form promulgated by the State Board of Insurance and on one which discloses the cost reduction resulting from the exclusion of that coverage.

C.S.S.B. 812 adds Subsection (F) to Article 3.70-2 to require that benefits for care and treatment of loss or impairment of speech or hearing be available to group policy or contract holders. The policy or contract holders may accept, negotiate modification, or reject such benefits.

C.S.S.B. 812 and S.B. 812 each amend Article 21.52, Insurance Code, to include audiologists and speech-language pathologists in Section 1. The definition of speech-language pathologist in the substitute requires that the person have a master's or doctorate degree in speech-language pathology from an accredited college or university and be certified by the American Speech-Language and Hearing Association. The definition in the original bill does not include the academic requirement. C.S.S.B. 812 corrects the name of the American Speech-Language and Hearing Association in the definitions of audiologist and speech-language pathologist.

Summary of Committee Action

Public notice was posted in accordance with Rule 4, Section 12 of the Rules of Procedure of the House of Representatives, and a public hearing was held May 3, 1983.

The following witnesses testified in favor of S.B. 812:

Dr. Patricia Cole, Speech Pathologist, representing the Texas Speech, Language, and Hearing Association;

Carmen A. Quesada, Executive Director of the Association for Retarded Citizens, representing the Association for Retarded Citizens;

Michael P. Twombly, Director of Texas Society for Autistic Citizens, representing Texas Society for Autistic Citizens.

The following witnesses testified in opposition to S.B. 812:

Ray Jones, Hearing Aid Sales, representing himself;

Ed Baxter, Vice President of Government Relations, Blue Cross/Blue Shield of Texas, representing Blue Cross/Blue Shield of Texas;

Will D. Davis, Attorney, representing the Texas Legal Reserve Officials Association;

Sam Winters, Attorney, representing the Texas Life Insurance Association.

S.B. 812 was referred to the Subcommittee on Life and Health Insurance, consisting of Jesse Oliver, Chair; Phyllis Robinson; and John Gavin.

On May 6, 1983, the subcommittee reported S.B. 812 to the Committee with recommendation that it do pass without amendment.

On May 10, 1983, the Committee adopted a substitute to the bill. A motion to report S.B. 812 to the House with the recommendation that it do pass as substituted was adopted by a record vote of 5 ayes; 0 nays; 0 present, not voting; and 4 absent.

On May 12, 1983, in a formal meeting a motion to reconsider C.S.S.B. 812 was adopted with no objections. The previous substitute was withdrawn and another introduced. There being no objections, the new substitute was adopted. The motion to report S.B. 812 to the House with the recommendation that it do pass as substituted passed by a record vote of 5 ayes; 1 nay; 1 present, not voting; and 2 absent.

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

May 13, 1983

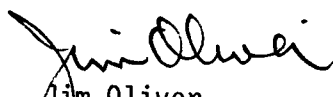
Honorable Bob Simpson, Chair
Committee on Insurance
House of Representatives
Austin, Texas

In Re: House Committee Substitute for
Senate Bill No. 812

Sir:

In response to your request for a Fiscal Note on the House Committee Substitute for Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance;
LBB Staff: JO, JH, SB, DM

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

April 13, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Committee Substitute for
Senate Bill No. 812

Sir:

In response to your request for a Fiscal Note on Committee Substitute for Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance;
LBB Staff: JO, JH, SB, PA

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

March 25, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Senate Bill No. 812
By: Brooks

Sir:

In response to your request for a Fiscal Note on Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance, LBB Staff: JO, JH, SB, bdt

6

ADOPTED

MAY 25 1983

Betty Murray
Chief Clerk

By Brooks House of Representatives

Substitute the following for S.B. 812:

By

Amey Sitr

amending Subsection (B) and adding Subsection (F), Section 2, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas Insurance Code) and amending Article 21.52, Insurance Code.

A BILL TO BE ENTITLED

AN ACT

relating to insurance coverage for the services of certain audiologists, speech pathologists, ~~and~~ language pathologists *and dentists;*

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 2, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955, *as amended* (Article 3.70-2, Vernon's Texas Insurance Code), is amended by amending Subsection (B) and adding Subsection (F) to read as follows:

(B) No policy of accident and sickness insurance shall make benefits contingent upon treatment or examination by a particular practitioner or by particular practitioners, *of the healing arts hereinafter designated* who will be *unless such policy contains a provision designating the* recognized by the insurer and those who will not be recognized by *practitioner or practitioners* this insurer. Such provision may be located in the "Exceptions" or *or practitioners* "Exceptions and Reductions" provisions, or elsewhere in the policy, or by endorsement attached to the policy, at the insurer's option. In designating the practitioners who will and will not be recognized, such provision shall use the following terms: Doctor of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor of Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist, *1/2* and Speech-language Pathologist. For purposes of this Act, such designations shall have the following meanings:

"Doctor of Medicine: One licensed by the Texas State Board of Medical Examiners on the basis of the degree *↓* Doctor of Medicine[↓];

"Doctor of Osteopathy: One licensed by the Texas State Board of Medical Examiners on the basis of the degree of *↓* Doctor of Osteopathy[↓];

"Doctor of Dentistry: One licensed by the State Board of Dental

House Substitute
5/30/83

1 Examiners;

2 " Doctor of Chiropractic: One licensed by the Texas Board of
3 Chiropractic Examiners;

4 " Doctor of Optometry: One licensed by the Texas State Board
5 of Examiners in Optometry; [and]

6 " Doctor of Podiatry: One licensed by the State Board of
7 Chiropody Examiners;

8 " Audiologist: One with a master's or doctorate degree in
9 audiology from an accredited college or university and who is
10 certified by the American Speech-language and Hearing Association; and

11 " Speech-language Pathologist: One with a master's or
12 doctorate degree in speech pathology or speech-language pathology
13 from an accredited college or university and who is certified by
14 the American Speech-language and Hearing Association. ³⁶ _{1.2}

15 " (F) Insurers, nonprofit hospital and medical service plan corpora-
16 tions subject to chapter 20 of this code, and health maintenance or-
17 ganizations transacting health insurance or providing ²¹ other health
18 coverage in this state shall offer and make available, ³ under group
19 policies, contracts, and plans providing hospital and medical coverage
20 on an expense incurred, service or prepaid basis, benefits for the
21 necessary care and treatment of loss or impairment of speech or hearing
22 that are not less favorable than for physical illness generally, subject
23 to the same durational limits, dollar limits, deductibles, and coinsur-
24 ance factors. Such offer of benefits shall be subject to the right of
25 the group policy or contract holder to reject the coverage or to select
26 any alternative level of benefits if such right is offered by or nego-
27 tiated with such insurer, service plan corporation, or health
28 maintenance organization. ⁴

29 SECTION 2 Article 21.52, Insurance Code, is amended to read
30 as follows:

31 " Art^{ile} 21.52, RIGHT TO SELECT PRACTITIONER UNDER HEALTH AND
32 ACCIDENT POLICIES.

1 " ¹⁰¹Sec 1. DEFINITIONS. As used in this Article:

2 " (a) "health insurance policy" means any individual, group,
3 blanket, or franchise insurance policy, insurance agreement, or
4 group hospital service contract, providing benefits for medical or
5 surgical expenses incurred as a result of an accident or sickness;

6 " (b) "doctor of podiatric medicine" includes D.P.M.,
7 podiatrist, doctor of surgical chiropody, D.S.C. and chiropodist;

8 " (c) "doctor of optometry" includes optometrist, doctor of
9 optometry, and O.D.; [and]

10 " (d) "doctor of chiropractic" means a person who is licensed ^{3/4}
11 by the Texas Board of Chiropractic Examiners to practice
12 chiropractic; [-]

13 " (e) [~~+~~] "licensed dentist" means a person who is licensed
14 to practice dentistry by the State Board of Dental Examiners;

15 " (f) "audiologist" means a person who has received a master's
16 or doctorate degree in audiology from an accredited college or
17 university and is certified by the American Speech-language and Hearing
18 Association; and

19 " (g) "speech-language pathologist" means a person who has received a
20 master's or doctorate degree in speech-language pathology from an
21 accredited college or university and is certified by the American
22 Speech-language and Hearing Association to restore speech loss or correct
23 a speech impairment.

24 " ¹⁰¹Sec 2. APPLICATION OF THIS ARTICLE. This article applies
25 to and embraces all insurance companies, associations, and
26 organizations, whether incorporated or not, which provide health
27 benefits, accident benefits, or health and accident benefits for
28 medical or surgical expenses incurred as a result of an accident or
29 sickness. Without limiting the foregoing, this article
30 specifically applies to the insurance companies, associations, and
31 organizations which come within the purview of the following
32 designated chapters of the Insurance Code: Chapter 3, pertaining
33 to life, health and accident insurance companies; Chapter 8,
34 pertaining to general casualty companies; Chapter 10, pertaining to
35 fraternal benefit societies; Chapter 11, pertaining to mutual life
36 insurance companies; Chapter 12, pertaining to local mutual aid ^{4/5}

1 associations; Chapters 13 and 14, pertaining to statewide mutual
2 assessment companies, mutual assessment companies, and mutual
3 assessment life, health and accident associations; Chapter 15,
4 pertaining to mutual insurance companies writing other than life
5 insurance; Chapter 18, pertaining to underwriters making insurance
6 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
7 exchanges; and Chapter 22, pertaining to stipulated premium
8 insurance companies. This article also applies to health
9 maintenance organizations established pursuant to Chapter 214, Acts
10 of the 64th Legislature, Regular Session, 1975 (Articles
11 20A.01-20A.33., Insurance Code), as now or hereafter amended.

12 ^{Section} Sect 3. SELECTION OF PRACTITIONERS. Any person who is
13 issued, who is a party to, or who is a beneficiary under any health
14 insurance policy delivered, renewed, or issued for delivery in this
15 state by any insurance company, association, or organization to
16 which this article applies may select a licensed doctor of
17 podiatric medicine, a licensed dentist, or a doctor of chiropractic
18 to perform the medical or surgical services or procedures scheduled
19 in the policy which fall within the scope of the license of that
20 practitioner, [doctor-or] a licensed doctor of optometry to perform
21 the services or procedures scheduled in the policy which fall
22 within the scope of the license of that doctor of optometry, an
23 audiologist to measure hearing for the purpose of determining the
24 presence or extent of a hearing loss and to provide aural
25 rehabilitation services to a person with a hearing loss if those
26 services or procedures are scheduled in the policy, or a 5/6
27 speech-language pathologist to evaluate speech and language and to
28 provide habilitative and rehabilitative services to restore speech
29 or language loss or to correct a speech or language impairment if
30 those services or procedures are scheduled in the policy. The
31 [and] payment or reimbursement by the insurance company,

1 association or organization for those services or procedures in
2 accordance with the payment schedule or the payment provisions in
3 the policy shall not be denied because the same were performed by a
4 licensed doctor of podiatric medicine, a licensed doctor of
5 optometry, [or] a licensed doctor of chiropractic, a licensed
6 dentist, an audiologist, or a speech-language pathologist. There
7 shall not be any classification, differentiation, or other
8 discrimination in the payment schedule or the payment provisions in
9 a health insurance policy, nor in the amount or manner of payment
10 or reimbursement thereunder, between scheduled services or
11 procedures when performed by a doctor of podiatric medicine, a
12 doctor of optometry, [or] a doctor of chiropractic, a licensed
13 dentist, an audiologist, or a speech-language pathologist which
14 fall within the scope of his license or certification and the same
15 services or procedures when performed by any other practitioner of
16 the healing arts whose services or procedures are covered by the
17 policy. Any provision in a health insurance policy contrary to or
18 in conflict with the provisions of this article shall, to the
19 extent of the conflict, be void, but such invalidity shall not
20 affect the validity of the other provisions of this policy. Any
21 presently approved policy form containing any provision in conflict
22 with the requirements of this Act shall be brought into compliance
23 with this Act by the use of riders and endorsements which have been
24 approved by the State Board of Insurance or by the filing of new or
25 revised policy forms for approval by the State Board of Insurance.

26 ¹⁰ [Sect-3.---SELECTION-OF-PRACTITIONERS.---Any-person-who-is
27 issued, who-is-a-party-to, or-who-is-a-beneficiary-under-any-health
28 insurance-policy-delivered, renewed, or-issued-for-delivery-in-this
29 state-by-any-insurance-company, association, or-organization-to
30 which-this-article-applies-may-select-a--licensed-doctor-of
31 podiatric-medicine-or-a-licensed-dentist-to-perform-the-medical-or

1 surgical-services-or-procedures-scheduled-in-the-policy-which-fall
2 within-the-scope-of-the-license-of-that-doctor-or-a-licensed-doctor
3 of-optometry-or-licensed-dentist-to-perform-the-services-or
4 procedures-scheduled-in-the-policy-which-fall-within-the-scope-of
5 the-license-of-that-doctor-of-optometry-or-licensed-dentist,-and
6 payment-or-reimbursement-by-the-insurance-company,-association,-or
7 organization-for-those-services-or-procedures-in-accordance-with
8 the-payment-schedule-or-the-payment-provisions-in-the-policy-shall
9 not-be-denied-because-the-same-were-performed-by-a-licensed-doctor
10 of-podiatric-medicine,-a-licensed-doctor-of-optometry,-or-a
11 licensed-dentist,--There-shall-not-be-any-classification,
12 differentiation,-or-other-discrimination-in-the-payment-schedule-or
13 the-payment-provisions-in-a-health-insurance-policy,-nor-in-the
14 amount-or-manner-of-payment-or-reimbursement-thereunder,-between
15 scheduled-services-or-procedures-when-performed-by-a-doctor-of
16 podiatric-medicine,-a-doctor-of-optometry,-or-a-licensed-dentist 118
17 which-fall-within-the-scope-of-his-license-and-the-same-services-or
18 procedures-when-performed-by-any-other-practitioner-of-the-healing
19 arts-whose-services-or-procedures-are-covered-by-the-policy,--Any
20 provision-in-a-health-insurance-policy-contrary-to-or-in-conflict
21 with-the-provisions-of-this-article-shall,-to-the-extent-of-the
22 conflict,-be-void,-but-such-invalidity-shall-not-affect-the
23 validity-of-the-other-provisions-of-this-policy,--Any-presently
24 approved-policy-form-containing-any-provision-in-conflict-with-the
25 requirements-of-this-Act-may-be-brought-into-compliance-with-this
26 Act-by-the-use-of-riders-and-endorsements-which-have-been-approved
27 by-the-State-Board-of-Insurance-or-by-the-filing-of-new-or-revised
28 policy-forms-for-approval-by-the-State-Board-of-Insurance.] //

29 SECTION 3. CERTAIN EXEMPTIONS NOT APPLICABLE. The exemptions
30 and exceptions in Articles 13.09 and 21.41 of the Insurance Code do
31 not apply to this article.

32 SECTION 4. This Act takes effect September 1, 1983.

1 SECTION 5. The importance of the legislation and the crowded
2 condition of the calendars in both houses create an emergency and
3 an imperative public necessity that the constitutional rule requiring
4 bills to be read on three several days in each house be suspended, and
5 this rule is hereby suspended.

Y. L. L.
Lee

Enrolled May 30, 1983
Kathy Spaw
Enrolling Clerk

S.B. No. 812

AN ACT

relating to insurance coverage for the services of certain audiologists, speech pathologists, language pathologists, and dentists; amending Subsection (B), and adding Subsection (F), Section 2, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955 (Article 3.70-2, Vernon's Texas Insurance Code) and amending Article 21.52, Insurance Code.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 2, Chapter 397, Acts of the 54th Legislature, Regular Session, 1955, as amended (Article 3.70-2, Vernon's Texas Insurance Code), is amended by amending Subsection (B) and adding Subsection (F) to read as follows:

"(B) No policy of accident and sickness insurance shall make benefits contingent upon treatment or examination by a particular practitioner or by particular practitioners of the healing arts hereinafter designated unless such policy contains a provision designating the practitioner or practitioners who will be recognized by the insurer and those who will not be recognized by the insurer. Such provision may be located in the 'Exceptions' or 'Exceptions and Reductions' provisions, or elsewhere in the policy, or by endorsement attached to the policy, at the insurer's option. In designating the practitioners who will and will not be recognized, such provision shall use the following terms: Doctor of Medicine, Doctor of Osteopathy, Doctor of Dentistry, Doctor of Chiropractic, Doctor of Optometry, Doctor of Podiatry, Audiologist,

Amel
2/22/22
Hae

S.B. No. 812

1 and Speech-language Pathologist. For purposes of this Act, such
2 designations shall have the following meanings:

3 "Doctor of Medicine: One licensed by the Texas State Board
4 of Medical Examiners on the basis of the degree 'Doctor of
5 Medicine';

6 "Doctor of Osteopathy: One licensed by the Texas State Board
7 of Medical Examiners on the basis of the degree of 'Doctor of
8 Osteopathy';

9 "Doctor of Dentistry: One licensed by the State Board of
10 Dental Examiners;

11 "Doctor of Chiropractic: One licensed by the Texas Board of
12 Chiropractic Examiners;

13 "Doctor of Optometry: One licensed by the Texas State Board
14 of Examiners in Optometry; [and]

15 "Doctor of Podiatry: One licensed by the State Board of
16 Chiropody Examiners;

17 "Audiologist: One with a master's or doctorate degree in
18 audiology from an accredited college or university and who is
19 certified by the American Speech-language and Hearing Association;
20 and

21 "Speech-language Pathologist: One with a master's or
22 doctorate degree in speech pathology or speech-language pathology
23 from an accredited college or university and who is certified by
24 the American Speech-language and Hearing Association."

25 "(F) Insurers, nonprofit hospital and medical service plan
26 corporations subject to Chapter 20 of this code, and health
27 maintenance organizations transacting health insurance or providing

1 Rel
Vee

S.B. No. 812

1 other health coverage in this state shall offer and make available,
2 under group policies, contracts, and plans providing hospital and
3 medical coverage on an expense incurred, service or prepaid basis,
4 benefits for the necessary care and treatment of loss or impairment
5 of speech or hearing that are not less favorable than for physical
6 illness generally, subject to the same durational limits, dollar
7 limits, deductibles, and coinsurance factors. Such offer of
8 benefits shall be subject to the right of the group policy or
9 contract holder to reject the coverage or to select any alternative
10 level of benefits if such right is offered by or negotiated with
11 such insurer, service plan corporation, or health maintenance
12 organization."

13 SECTION 2. Article 21.52, Insurance Code, is amended to read
14 as follows:

15 "Article 21.52. RIGHT TO SELECT PRACTITIONER UNDER HEALTH
16 AND ACCIDENT POLICIES.

17 "Section 1. DEFINITIONS. As used in this article:

18 "(a) 'health insurance policy' means any individual, group,
19 blanket, or franchise insurance policy, insurance agreement, or
20 group hospital service contract, providing benefits for medical or
21 surgical expenses incurred as a result of an accident or sickness;

22 "(b) 'doctor of podiatric medicine' includes D.P.M.,
23 podiatrist, doctor of surgical chiropody, D.S.C. and chiropodist;

24 "(c) 'doctor of optometry' includes optometrist, doctor of
25 optometry, and O.D.; [and]

26 "(d) 'doctor of chiropractic' means a person who is licensed

File
Vice

S.B. No. 812

1 by the Texas Board of Chiropractic Examiners to practice
2 chiropractic; [-]

3 "(e) [~~d~~] 'licensed dentist' means a person who is licensed
4 to practice dentistry by the State Board of Dental Examiners;

5 "(f) 'audiologist' means a person who has received a
6 master's or doctorate degree in audiology from an accredited
7 college or university and is certified by the American
8 Speech-language and Hearing Association; and

9 "(g) 'speech-language pathologist' means a person who has
10 received a master's or doctorate degree in speech-language
11 pathology from an accredited college or university and is certified
12 by the American Speech-language and Hearing Association to restore
13 speech loss or correct a speech impairment.

14 "Section 2. APPLICATION OF THIS ARTICLE. This article
15 applies to and embraces all insurance companies, associations, and
16 organizations, whether incorporated or not, which provide health
17 benefits, accident benefits, or health and accident benefits for
18 medical or surgical expenses incurred as a result of an accident or
19 sickness. Without limiting the foregoing, this article
20 specifically applies to the insurance companies, associations, and
21 organizations which come within the purview of the following
22 designated chapters of the Insurance Code: Chapter 3, pertaining
23 to life, health and accident insurance companies; Chapter 8,
24 pertaining to general casualty companies; Chapter 10, pertaining to
25 fraternal benefit societies; Chapter 11, pertaining to mutual life
26 insurance companies; Chapter 12, pertaining to local mutual aid

File
H.C.

S.B. No. 812

1 associations; Chapters 13 and 14, pertaining to statewide mutual
2 assessment companies, mutual assessment companies, and mutual
3 assessment life, health and accident associations; Chapter 15,
4 pertaining to mutual insurance companies writing other than life
5 insurance; Chapter 18, pertaining to underwriters making insurance
6 on the Lloyd's Plan; Chapter 19, pertaining to reciprocal
7 exchanges; and Chapter 22, pertaining to stipulated premium
8 insurance companies. This article also applies to health
9 maintenance organizations established pursuant to Chapter 214, Acts
10 of the 64th Legislature, Regular Session, 1975 (Articles
11 20A.01-20A.33., Insurance Code), as now or hereafter amended.

12 "Section 3. SELECTION OF PRACTITIONERS. Any person who is
13 issued, who is a party to, or who is a beneficiary under any health
14 insurance policy delivered, renewed, or issued for delivery in this
15 state by any insurance company, association, or organization to
16 which this article applies may select a licensed doctor of
17 podiatric medicine, a licensed dentist, or a doctor of chiropractic
18 to perform the medical or surgical services or procedures scheduled
19 in the policy which fall within the scope of the license of that
20 practitioner, [~~doctor~~-er] a licensed doctor of optometry to perform
21 the services or procedures scheduled in the policy which fall
22 within the scope of the license of that doctor of optometry, an
23 audiologist to measure hearing for the purpose of determining the
24 presence or extent of a hearing loss and to provide aural
25 rehabilitation services to a person with a hearing loss if those
26 services or procedures are scheduled in the policy, or a

Y BCC
Lee

S.B. No. 812

1 speech-language pathologist to evaluate speech and language and to
2 provide habilitative and rehabilitative services to restore speech
3 or language loss or to correct a speech or language impairment if
4 those services or procedures are scheduled in the policy. The
5 [and] payment or reimbursement by the insurance company,
6 association, or organization for those services or procedures in
7 accordance with the payment schedule or the payment provisions in
8 the policy shall not be denied because the same were performed by a
9 licensed doctor of podiatric medicine, a licensed doctor of
10 optometry, [ex] a licensed doctor of chiropractic, a licensed
11 dentist, an audiologist, or a speech-language pathologist. There
12 shall not be any classification, differentiation, or other
13 discrimination in the payment schedule or the payment provisions in
14 a health insurance policy, nor in the amount or manner of payment
15 or reimbursement thereunder, between scheduled services or
16 procedures when performed by a doctor of podiatric medicine, a
17 doctor of optometry, [ex] a doctor of chiropractic, a licensed
18 dentist, an audiologist, or a speech-language pathologist which
19 fall within the scope of his license or certification and the same
20 services or procedures when performed by any other practitioner of
21 the healing arts whose services or procedures are covered by the
22 policy. Any provision in a health insurance policy contrary to or
23 in conflict with the provisions of this article shall, to the
24 extent of the conflict, be void, but such invalidity shall not
25 affect the validity of the other provisions of this policy. Any
26 presently approved policy form containing any provision in conflict

Miss
Y. B. 22
11/22

S.B. No. 812

1 with the requirements of this Act shall be brought into compliance
2 with this Act by the use of riders and endorsements which have been
3 approved by the State Board of Insurance or by the filing of new or
4 revised policy forms for approval by the State Board of Insurance.

5 "[Section-3. ---SELECTION-OF-PRACTITIONERS. --Any-person-who-is
6 issued,-who-is-a-party-to,-or-who-is-a-beneficiary-under-any-health
7 insurance-policy-delivered,-renewed,-or-issued-for-delivery-in-this
8 state-by-any-insurance-company,-association,-or-organization--to
9 which--this--article--applies--may--select--a--licensed--doctor--of
10 pediatrics-medicine-or-a-licensed-dentist-to-perform-the-medical--or
11 surgical--services-or-procedures-scheduled-in-the-policy-which-fall
12 within-the-scope-of-the-license-of-that-doctor-or-a-licensed-doctor
13 of-optometry--or--licensed--dentist--to--perform--the--services--or
14 procedures--scheduled--in-the-policy-which-fall-within-the-scope-of
15 the-license-of-that-doctor-of-optometry-or--licensed--dentist,-and
16 payment--or-reimbursement-by-the-insurance-company,-association,-or
17 organization-for-these-services-or-procedures--in--accordance--with
18 the--payment-schedule-or-the-payment-provisions-in-the-policy-shall
19 not-be-denied-because-the-same-were-performed-by-a-licensed--doctor
20 of--pediatrics--medicine,-a--licensed--doctor--of--optometry,-or-a
21 licensed--dentist. ---There--shall--not--be--any--classification,
22 differentiation,-or-other-discrimination-in-the-payment-schedule-or
23 the--payment--provisions--in--a-health-insurance-policy,-nor-in-the
24 amount-or-manner-of-payment-or--reimbursement--thereunder,-between
25 scheduled--services--or--procedures--when--performed-by-a-doctor-of
26 pediatrics-medicine,-a-doctor-of-optometry,-or--a--licensed--dentist

OK
Lee
Hoe

S.B. No. 812

1 which-fall-within-the-scope-of-his-license-and-the-same-services-or
2 procedures--when-performed-by-any-other-practitioner-of-the-healing
3 arts-whose-services-or-procedures-are-covered-by-the--policy- ---Any
4 provision--in--a-health-insurance-policy-contrary-to-or-in-conflict
5 with-the-provisions-of-this-article-shall,-to--the--extent--of--the
6 conflict,--be--void,--but--such--invalidity--shall--not--affect-the
7 validity-of-the-other-provisions-of--this--policy- ---Any--presently
8 approved--policy-form-containing-any-provision-in-conflict-with-the
9 requirements-of-this-Act-may-be-brought-into-compliance--with--this
10 Act--by-the-use-of-riders-and-endorsements-which-have-been-approved
11 by-the-State-Board-of-Insurance-or-by-the-filing-of-new-or--revised
12 policy-forms-for-approval-by-the-State-Board-of-Insurance-]"

13 SECTION 3. CERTAIN EXEMPTIONS NOT APPLICABLE. The
14 exemptions and exceptions in Articles 13.09 and 21.41 of the
15 Insurance Code do not apply to this article.

16 SECTION 4. This Act takes effect September 1, 1983.

17 SECTION 5. The importance of this legislation and the
18 crowded condition of the calendars in both houses create an
19 emergency and an imperative public necessity that the
20 constitutional rule requiring bills to be read on three several
21 days in each house be suspended, and this rule is hereby suspended.

Handwritten notes:
S.B. No. 812
See

S.B. No. 812

President of the Senate

Speaker of the House

I hereby certify that S.B. No. 812 passed the Senate on April 26, 1983, by a viva-voce vote; and that the Senate concurred in House amendment on May 30, 1983, by a viva-voce vote.

Secretary of the Senate

I hereby certify that S.B. No. 812 passed the House, with amendment, on May 28, 1983, by a non-record vote.

Chief Clerk of the House

Approved:

Date

Governor

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

April 13, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Committee Substitute for
Senate Bill No. 812

Sir:

In response to your request for a Fiscal Note on Committee Substitute for Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance;
LBB Staff: JO, JH, SB, PA

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE

March 25, 1983

Honorable Chet Brooks, Chairman
Committee on Health and Human Resources
Senate Chamber
Austin, Texas

In Re: Senate Bill No. 812
By: Brooks

Sir:

In response to your request for a Fiscal Note on Senate Bill No. 812 (relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists) this office has determined the following:

No fiscal implication to the State or units of local government is anticipated.


Jim Oliver
Director

Source: Board of Insurance, LBB Staff: JO, JH, SB, bdt

S. B. No. 812

By B. Brook

AN ACT relating to insurance coverage for the services of certain audiologists, speech pathologists, and language pathologists.

3-8-83 Filed with the Secretary of the Senate
MAR 9 1983 Read, referred to Committee on HEALTH AND HUMAN RESOURCES
Reported favorably.
APR 12 1983 Reported adversely, with favorable Committee Substitute; Committee Substitute read first time.
Ordered not printed.
APR 26 1983 Senate and Constitutional Rules to permit consideration suspended by unanimous consent.
To permit consideration, reading and passage, Senate and Constitutional Rules suspended by vote of _____ yeas, _____ nays.
APR 28 1983 Read second time and { ordered engrossed.
passed to third reading
Caption ordered amended to conform to body of bill.
APR 28 1983 Senate and Constitutional 3-Day Rules suspended by vote of 30 yeas, 1 nays to place bill on third reading and final passage.
APR 28 1983 Read third time and passed by a viva-voce vote.

OTHER ACTION:

Betty King
Secretary of the Senate

April 26, 1983 Engrossed
4-27-83 Sent to House

Katey Spaw
ENGROSSING CLERK

APR 27 1983 Received from the Senate
APR 27 1983 Read first time and referred to Committee on Insurance
5.12.83 Reported favorably substitute amended, sent to Printer at 4:45pm
MAY 16 1983 Printed and Distributed 10:22am
5.17.83 Sent to Committee on Calendars 3:15pm
MAY 25 1983 Read Second time (amended): passed to third reading (failed)
by (Non-Record Vote) Record Vote of _____ yeas, _____ nays
Present, not voting.
Constitutional Rule requiring bills to be read on three several days suspended (failed to suspend) by a four-fifths vote of _____ yeas _____ nays _____ present not voting.
MAY 28 1983 Read third time (amended); finally passed (failed) by a (Non-Record Vote) Record Vote of _____ yeas _____ nays
present not voting.
MAY 28 1983 Caption ordered amended to conform to body of bill.
MAY 28 1983 Returned to Senate.

MAY 28 1983 RETURNED FROM HOUSE
with amendments

MAY 30 1983 Senate concurred in House amendments by viva voce vote.

Betty Murray
Chief Clerk of the House